

**GENERAL ASSEMBLY OF NORTH CAROLINA
SESSION 2011**

H

1

HOUSE BILL 143

Short Title: ACH & 122C Screening & Assessment Funds. (Public)

Sponsors: Representatives Farmer-Butterfield, Weiss, Earle, and Pierce (Primary Sponsors).

For a complete list of Sponsors, see Bill Information on the NCGA Web Site.

Referred to: Appropriations.

February 21, 2011

A BILL TO BE ENTITLED

1
2 AN ACT TO APPROPRIATE FUNDS TO SUPPORT PREADMISSION SCREENING,
3 ASSESSMENT, AND CARE PLAN DEVELOPMENT IN ADULT CARE HOMES AND
4 FACILITIES LICENSED UNDER CHAPTER 122C OF THE GENERAL STATUTES,
5 BASED ON RECOMMENDATION 4.1 FROM THE NORTH CAROLINA INSTITUTE
6 OF MEDICINE TASK FORCE ON THE COLOCATION OF DIFFERENT
7 POPULATIONS IN ADULT CARE HOMES, AND AS RECOMMENDED BY THE
8 NORTH CAROLINA STUDY COMMISSION ON AGING.

9 The General Assembly of North Carolina enacts:

10 **SECTION 1.(a)** There is appropriated from the General Fund to the Department of
11 Health and Human Services the sum of nine hundred thousand dollars (\$900,000) in recurring
12 funds for the 2011-2012 fiscal year and the 2012-2013 fiscal year, two hundred twenty-eight
13 thousand dollars (\$228,000) in nonrecurring funds for the 2011-2012 fiscal year, and two
14 hundred five thousand dollars (\$205,000) in nonrecurring funds for the 2012-2013 fiscal year to
15 support implementation and use of standardized preadmission screening, resident assessment,
16 and care plan development for adult care homes and facilities licensed under Chapter 122C of
17 the General Statutes.

18 **SECTION 1.(b)** The Department shall require the use of a preadmission screening
19 tool which must provide information on the individual's diagnosis, assistance with activities of
20 daily living, degree of supervision, and any conditions that could pose a threat to the health or
21 safety of others. Individuals identified during the preadmission screening with a mental health
22 problem, substance abuse disorder, cognitive impairment, or intellectual disability must receive
23 a more thorough assessment by a trained mental health, substance abuse, or developmental
24 disability professional. The Department should develop time standards to ensure that
25 admissions are not unreasonably delayed due to the screening process. This preadmission
26 screening and assessment information shall be used by the facility and Local Management
27 Entity (LME) to develop a person-centered care plan for each individual.

28 Within one year of the implementation of preadmission screening, the Department
29 shall begin requiring screening, assessment, and care plan development for residents that were
30 not screened and assessed prior to admission.

31 **SECTION 2.** This act becomes effective July 1, 2011.

